The background of the entire page is a vibrant green. Scattered around the central text are seven hands, each with a unique and colorful paint design. The designs include various patterns of red, blue, yellow, and green, some resembling abstract art and others more like fingerprints. The hands are positioned at the top, bottom, and sides of the central text, creating a circular frame effect.

Resource Guide for Child Care Programs



Child Care
Services

1-1-2016

Articles in this document were sourced with permission from agencies outside the Oklahoma Department of Human Services. Those articles reflect policies of their respective authors and not necessarily those of the Oklahoma DHS.

Introduction

Child care programs have a great responsibility, through the trust that is given to them by parents, to care for Oklahoma’s children. This resource guide was created to assist in supporting parent partnerships. This also includes tools and resources to support programs in maintaining compliance with licensing requirements for child care programs.

This information is provided as a service and includes examples of tools for child care programs to use to help programs succeed in protecting the health and safety of children in child care.



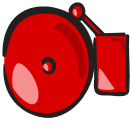


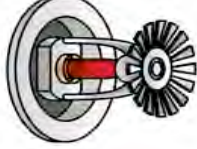
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CALENDAR YEAR

Smoke Detector 		Carbon Monoxide Detector 		Central Detection System and Alarm System for Smoke and Carbon Monoxide* 		Reviews 	Fire Extinguisher 
Month	Date	Month	Date	Month	Date	Lock-down Review Personnel Review Date Relocation Review Personnel Review Date Emergency Plans & Procedures Director Review Date	Sprinkler System  Inspected and Tagged
Jan.		Jan.		Jan.			
Feb.		Feb.		Feb.			
March		March		March			
April		April		April			
May		May		May			
June		June		June			
July		July		July			
Aug.		Aug.		Aug.			
Sept.		Sept.		Sept.			
Oct.		Oct.		Oct.			
Nov.		Nov.		Nov.			
Dec.		Dec.		Dec.			

*This is not required when a company continuously monitors the system for full function.

DRILLS CALENDAR YEAR

Tornado					Fire				
									
Month	Date	Time	Signature (Director/Personnel in charge during drill)	Drills	Month	Date	Time	Signature (Director/Personnel in charge during drill)	Drills
Jan.					Jan.				
Feb.					Feb.				
March					March				
April					April				
May					May				
June					June				
July					July				
Aug.					Aug.				
Sept.					Sept.				
Oct.					Oct.				
Nov.					Nov.				
Dec.					Dec.				



First Aid and Emergency Supply Kits



First Aid Kits

(Supplies stored together in portable container)

- Non-medicated adhesive strips
- Sterile gauze pads
- Rolled flexible or stretch gauze
- Bandage tape
- Disposable non-porous, latex-free gloves
- Blunt-tipped scissors
- Tweezers
- A non-glass and non-mercury thermometer
- A current first aid guide
- A copy of the posted program information and emergency numbers

In addition, the first aid kits in vehicles include at least:

- A cold pack
- Liquid soap and water or individually packaged moist, disposable towelettes for cleaning wounds
- Hand sanitizer and moist, disposable towelettes for hand hygiene
- Plastic bags for disposal of items contaminated with blood or other body fluids
- A pen or pencil and note pad

Emergency Supply Kit

- Records
 - Emergency plans and procedures and alternate location addresses, phone numbers and contacts
 - Emergency contacts
 - Full names of children and personnel currently in attendance
- Emergency Supplies (portable container)
 - First aid kit
 - Children's prescribed medications, including life-threatening condition medications



Injury and Poison Exposure Log

Incidents are documented and maintained in one location for 12 months to determine patterns.

Child's Full Name	Age	Injury Date	Injury Time	Injury Type	Injury Location (at facility or off-site)	Personnel present at time of injury

Swimming Skill Assessment – Parent Statement

Please indicate the water depth in which your child may swim: _____

Please indicate your child's swimming level and capabilities:

☐ Non-swimmer ☐ Beginner ☐ Intermediate ☐ Advanced

Please indicate below if there is anything we should be aware of regarding your child's swimming capabilities and needs.

Parent/Guardian Signature: _____ Date: _____

Verbal Pick-up Authorization

This is to be used when obtaining verbal authorizations to pick-up a child when the individual is not previously indicated in the child's records.

Name of child: _____

Authorization: _____
Date Time

Authorization is valid: _____ to _____
Date Date

Individual providing authorization: _____

How their identity was verified: _____

Individual being given authorization: _____

Personnel receiving authorization: _____

How the identity of the individual picking up the child was verified: _____

Personnel who verified the identity of individual picking up the child: _____

Bullying

Early childhood often marks the first opportunity for young children to interact with each other. Between the ages of 3 and 5, kids are learning how to get along with each other, cooperate, share, and understand their feelings. Young children may be aggressive and act out when they are angry or don't get what they want, but this is not bullying. Still, there are ways to help children.

What is bullying?

Stopbullying.gov defines bullying as an unwanted, aggressive behavior among school-aged children that involves a real or perceived power imbalance. The behavior is repeated, or has the potential to be repeated, over time. Bullying includes actions such as making threats, spreading rumors, attacking someone physically or verbally, and excluding someone from a group on purpose.

The Roles Kids Play

There are many roles that kids can play. Kids can bully others, they can be bullied, or they may witness bullying. When kids are involved in bullying, they often play more than one role. It is important to understand the multiple roles kids play in order to effectively prevent and respond to bullying.

Related Topics

There are many other types of aggressive behavior that don't fit the definition of bullying. This does not mean that they are any less serious or require less attention than bullying. Rather, these behaviors require different prevention and response strategies.

What can you do?

- Learn what bullying is and what it is not.
- Encourage children to report bullying behavior.
- Establish a safe environment.
- Give a clear message that hurting others is unacceptable
- Respond when bullying happens.
- Involve families and others in creating a caring community



Child Guidance Principles

Atmosphere

Child guidance principles are used to:

- Promote an atmosphere that develops socially and emotionally healthy children
- Discourage behavioral issues

The program creates a caring community among the children, personnel and parents that is:

- Respectful of individuals, families and cultures
- Emotionally and physically safe
- Bully-free (Bullying is repeated disrespectful behavior to an individual or group that is intentional, aggressive and results in unequal power.)
- Cooperative rather than competitive
- Nurturing and caring
- Consistent and stable
- Relaxed and positive
- Encouraging of learning

Personnel:

- Meet the children's needs through positive interactions and program activities
- Respect the children's thoughts, feelings, interests, projects and time
- Provide positive reinforcement, such as recognizing and encouraging acceptable behaviors, efforts and accomplishments
- Intervene to:
 - Ensure emotional and physical safety for all the children, as quickly as possible
 - Solve problems in a comforting and supportive way, when necessary
- Give clear directions
- Provide guidance during activities and interactions
- Help the children feel successful at a task and give options for other tasks if the one chosen proves too difficult
- Teach children
 - By modeling appropriate behaviors
 - Understanding and empathy for others
 - To talk things out
 - Impulse control and appropriate expressions of anger
 - Assertive behavior rather than aggression

Personnel to Child Interactions

- Personnel play and interact with the children frequently:
 - Indoors and outdoors
 - Individually and in groups
 - While meeting the children's physical needs, such as at meal time
- Personnel hold, cuddle and rock children 2 years of age and younger.
- Personnel communicate and interact with individual children at the child's eye level, as much as possible.
- Personnel encourage language development by talking, describing events, reading stories, singing and playing musical games. With children 1 year of age and younger, personnel react to the child's sounds, name objects, and talk to them while meeting their physical needs, such as when diapering and feeding.
- Personnel actively seek meaningful conversations with the children and talk about events of importance to the child.
- Personnel are available and responsive to the children, such as:
 - Encouraging them to share their experiences, ideas and feelings
 - Listening to them with attention and respect
 - Sympathetically comforting a crying or distressed child
 - Encouraging them to report bullying behavior
- Personnel teach problem solving skills by encouraging the children to work through a problem rather than imposing a solution. Personnel facilitate rather than instruct, such as offering suggestions.
- Personnel interact with the children in a developmentally appropriate manner, such as more mentoring and less instructing as the child develops.
- Personnel communicate individual strengths to the children.

Child to Child Interactions

- Personnel encourage the children to develop social skills by:
 - Developing friendships
 - Learning to help
 - Working cooperatively with others
 - Learning from and with one another
- Personnel encourage the children to respect themselves, others and their environment.
- Personnel recognize and address known bullying behaviors by
 - Giving clear messages that hurting others is unacceptable
 - Involving families and personnel in creating a caring community



Considerations When Creating Emergency Plans

(For specific requirements regarding Emergency Preparedness refer to OAC 340:110-3-279)

Why is it Important to Prepare?

- Saves lives
- Protects property
- Enables programs to return to providing care after disaster
- Planning ahead is necessary for positive outcomes
- Providers should think through scenarios and envision what to do

Emergency Plan

- Develop an evacuation plan for different types of emergencies
- Practice the plan with the children (Sometimes good to practice “what ifs” – in bathroom, during meal time, at end of day, etc.)
- Encourage families to have and practice an emergency plan at their home
- Determine how families will be notified
- Determine how children will be told; be sensitive to fear factor
- Determine a method to notify personnel of emergencies without having to walk from room to room (Consider signaling personnel with and without electricity)
- Determine how to account for each person
- Have items ready to grab and go
- Prepare for evacuation away from child care, if necessary
- Create a transportation plan

Before an Emergency

- Know the plan and practice it
- Collect and keep up-to-date information on parents and children
- Stock supplies needed to remain in the facility or supplies needed when you have to grab and go
- Stay calm and be mindful of messages children are receiving from you/TV/others
- Instruct children on what to do when there is an emergency

Special Considerations

- Children 2 years old and younger, and children with disabilities or chronic medical conditions
- Children who are afraid of storms and/or noises
- Remember some children may hide when fearful
- One adult may have sole responsibility of a group of children
- Consider parents’ reactions and responses

Information to have Available in Case of Evacuation or Shelter-In-Place

- It is critical to know the identity of all personnel, visitors and children in the location at the time of an emergency; attendance sheets/sign-in book etc.
- Good to have two evacuation sites
- Parents need to have information about the evacuation sites
- Information on health, allergies and medications for all (include personnel)
- Back-up supplies and equipment (72 hours' worth without outside help for worse-case scenario)

After the Emergency

- Plan for reunification of family and safety for the child in shelter
- Assistance with mental and physical health needs of children, families and personnel
- Regaining trust and feeling of well-being
- Find available resources to assist children, families and personnel

Resources for Emergency Preparedness

Administration for Children and Families

<https://www.acf.hhs.gov/>

Link to emergency preparedness information on website:

<https://childcareta.acf.hhs.gov/emergency-preparedness-0>

Child Care Aware of America

<http://www.naccrra.org/>

Federal Emergency Management Agency

<http://www.fema.gov/>

Good Health Handbook - A Guide for Those Caring for Children

www.health.ok.gov

www.okdhs.org

National Center for Infants, Toddlers and Families (Zero to Three)

<http://zerotothree.org/>

Oklahoma Child Care Resource and Referral Association Inc.

<http://www.oklahomachildcare.org/>

Oklahoma State Department of Health

<http://www.ok.gov/health/>

Link to emergency preparedness information on website:

http://www.ok.gov/health/Disease,_Prevention,_Preparedness/Emergency_Preparedness_and_Response/Preparedness/

Ready: Prepare. Plan. Stay Informed.

<http://www.ready.gov/>

Save the Children

<http://www.savethechildren.org>

Partner Programs and Resources

Center for Early Childhood Professional Development

(CECPD): (405) 799-6383 or 1-888-446-7608, www.cecpd.org

Example of some services provided:

- Oklahoma Registry/REWARD Oklahoma
- Video Lending Library
- Child Care Career Training Series
- Environment Rating Scales Assessment
- Oklahoma Training Approval System
- Entry Level Child Care Training (ELCCT)
- Oklahoma's Director Credential

Good Health Handbook - A Guide for Those Caring for Children

- www.health.ok.gov
- www.okdhs.org

Oklahoma Child Care Resource and Referral Association

(OCCRRA): (405) 942-5001 or 1-888-962-2772, www.oklahomachildcare.org

Scholars for Excellence in Child Care

(Scholars): (405) 225-9395 or 1-866-343-3881, www.okhighered.org/scholars

Scholarships are available for:

- Career Technology Center Scholarship (Pathway to CDA)
- Community College Scholarship
- CDA Assessment Scholarship

Warmline and Mental Health Consultation

1-888-574-5437, <http://warmling.health.ok.gov/>

Example of some services provided:

Warmline

- Free telephone consultation for child care staff 8 a.m.-5 p.m. Monday-Friday
- 24-hour automated topic library with behavior and development, health and safety information
- Online topic access

Mental Health Consultation Services

- Clarify a problem
- Provide information including printed materials
- Provide community referrals to meet individual needs and requests
- Direct providers to relevant resources to assist with a concern
- Refer for a classroom observation and consultation

The image features a vibrant green background with seven hands arranged in a circular pattern. Each hand is painted with different colors and patterns, including red, yellow, blue, and green. The hands are positioned around the central text, which reads "Supplements".

Supplements

CHILD PASSENGER RESTRAINT SYSTEM

Oklahoma Statute
47 O.S. Section 11-1112
(Amended 11-1-15)

A. Every driver, when transporting a child under eight (8) years of age in a motor vehicle operated on the roadways, streets, or highways of this state, shall provide for the protection of said child by properly using a child passenger restraint system as follows:

1. A child under four (4) years of age shall be properly secured in a child passenger restraint system. The child passenger restraint system shall be rear-facing until the child reaches two (2) years of age or until the child reaches the weight or height limit of the rear-facing child passenger restraint system as allowed by the manufacturer of the child passenger restraint system, whichever occurs first; and

2. A child at least four (4) years of age but younger than eight (8) years of age, if not taller than 4 feet 9 inches in height, shall be properly secured in either a child passenger restraint system or child booster seat.

For purposes of this section and Section 11-1113 of this title, "child passenger restraint system" means an infant or child passenger restraint system which meets the federal standards as set by 49 C.F.R., Section 571.213.

B. If a child is eight (8) years of age or is taller than 4 feet 9 inches in height, a seat belt properly secured to the vehicle shall be sufficient to meet the requirements of this section.

C. The provisions of this section shall not apply to:

1. The driver of a school bus, taxicab, moped, motorcycle, or other motor vehicle not required to be equipped with safety belts pursuant to state or federal laws;

2. The driver of an ambulance or emergency vehicle;

3. The driver of a vehicle in which all of the seat belts are in use;

4. The transportation of children who for medical reasons are unable to be placed in such devices, provided there is written documentation from a physician of such medical reason; or

5. The transportation of a child who weighs more than forty (40) pounds and who is being transported in the back seat of a vehicle while wearing only a lap safety belt when the back seat of the vehicle is not equipped with combination lap and shoulder safety belts, or when the combination lap and shoulder safety belts in the back seat are being used by other children who weigh more than forty (40) pounds. Provided, however, for

purposes of this paragraph, back seat shall include all seats located behind the front seat of a vehicle operated by a licensed child care facility or church. Provided further, there shall be a rebuttable presumption that a child has met the weight requirements of this paragraph if at the request of any law enforcement officer, the licensed child care facility or church provides the officer with a written statement verified by the parent or legal guardian that the child weighs more than forty (40) pounds.

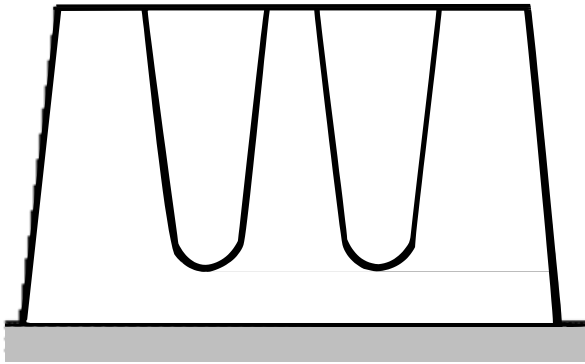
D. A violation of the provisions of this section shall be admissible as evidence in any civil action or proceeding for damages unless the plaintiff in such action or proceeding is a child under sixteen (16) years of age.

In any action brought by or on behalf of an infant for personal injuries or wrongful death sustained in a motor vehicle collision, the failure of any person to have the infant properly restrained in accordance with the provisions of this section shall not be used in aggravation or mitigation of damages.

E. A person who is certified as a Child Passenger Safety Technician and who in good faith provides inspection, adjustment, or educational services regarding child passenger restraint systems shall not be liable for civil damages resulting from any act or omission in providing such services, other than acts or omissions constituting gross negligence or willful or wanton misconduct.

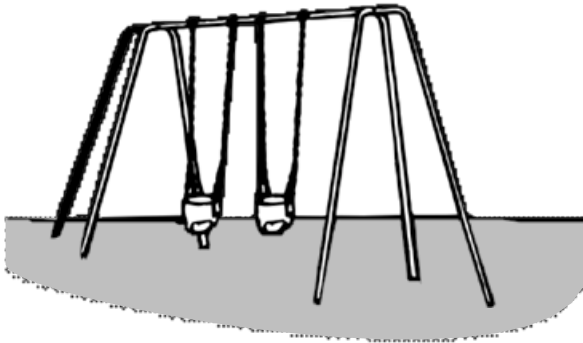
F. Any person convicted of violating subsection A of this section shall be punished by a fine of Fifty Dollars (\$50.00) and shall pay all court costs thereof. Revenue from such fine shall be apportioned to the Department of Public Safety Restricted Revolving Fund and used by the Oklahoma Highway Safety Office to promote the use of child passenger restraint systems as provided in Section 11-1113 of this title. This fine shall be suspended and the court costs limited to a maximum of Fifteen Dollars (\$15.00) in the case of the first offense upon proof of purchase or acquisition by loan of a child passenger restraint system. Provided, the Department of Public Safety shall not assess points to the driving record of any person convicted of a violation of this section.

USE ZONES



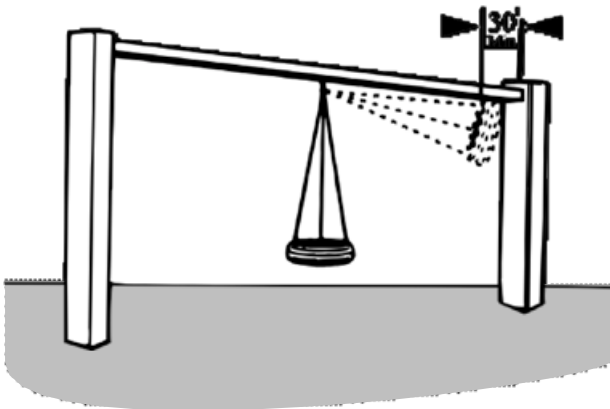
SINGLE-AXIS SWINGS

Six feet in all directions and to the front and rear of the swing a distance two times the length of the swing's chain.



SWING SECURED BY BAR OR STRAP

Six feet from the midpoint to the front and the rear of the swing.

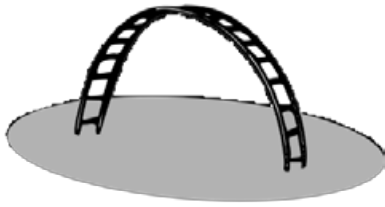


MULTI-AXIS OR TIRE SWINGS

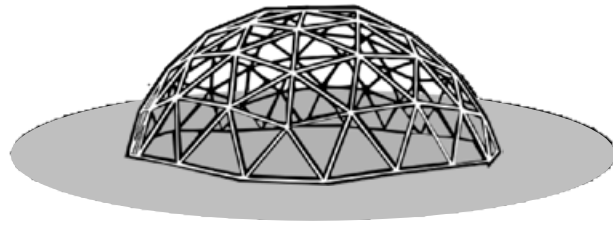
Six feet plus the length of the chain in every direction, and a 30-inch clearance between the seating surface of a fully extended tire swing and the support structure.

CLIMBING STRUCTURES

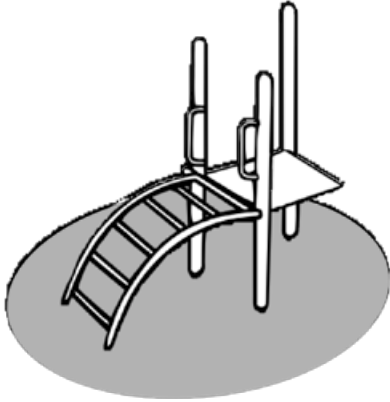
A minimum of six feet in all directions from the perimeter of the equipment.¹



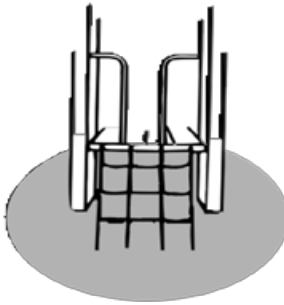
Simple Arch Climber



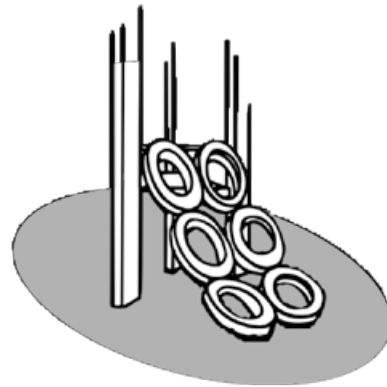
Geodesic Dome Climber



Arch Climber



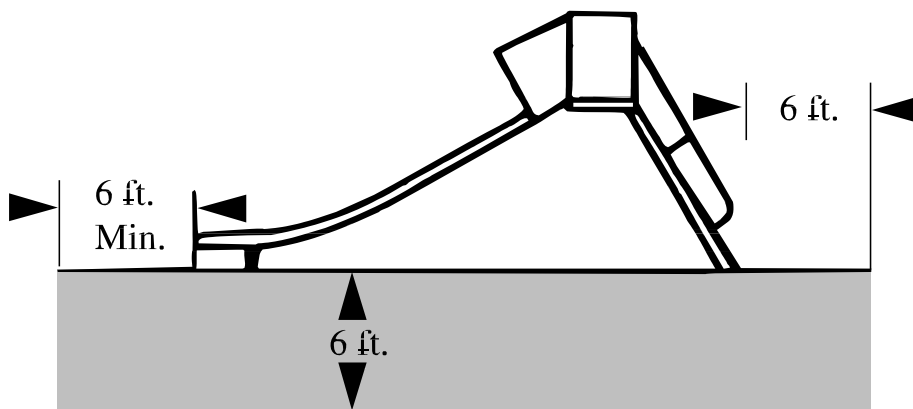
Chain Net Climber



Tire Climber

SLIDES

Six feet in all directions from the perimeter of the equipment.¹



¹ Refer to Use Zone requirements for non-portable play equipment, with a fall height of 30 inches or less.

WHAT IS CHILD ABUSE?

What is the Law? Oklahoma statutes define child abuse as harm or threatened harm to a child's health or welfare by a person responsible for the child. This includes non-accidental physical or mental injury, sexual abuse or neglect (10A O.S. § 1-2-101).

- Physical abuse is non-accidental physical injury to a child.
- Mental injury is an injury to a child's psychological growth and development. It is caused by a chronic pattern of behaviors, such as belittling, humiliating and ridiculing a child.
- Sexual abuse, in general terms, includes any sexual activity between an adult and a child for the purpose of sexually stimulating the adult, the child or others. Sexual abuse may also be committed by a person under the age of 18 when that person is either significantly older than the victim or is in a position of power or control over the child.
- Neglect is the failure of the parent or caretaker to provide a child with basic needs such as food, clothing, shelter, medical care, protection and supervision.
- Threatened harm means a substantial risk of harm to the child. It may include acts or expressions of intent to inflict actual harm presently or in the future.

Who must report? Every person, private citizen or professional, who has reason to believe that a child has been abused, is mandated by law to promptly report suspected abuse. Failure to do so is a misdemeanor. A person making a report in good faith is immune from civil or criminal liability. The name of the reporter is kept confidential.

When to report? A report should be made when there is reasonable cause to believe that a child has been abused or neglected or is in danger of being abused. A report of suspected abuse is a request for an investigation. Investigation of child abuse reports is the responsibility of Child Welfare workers and, when a crime may have been committed, law enforcement officials.

If other incidents of abuse occur after the initial report has been made, another report should be made.

How is abuse reported? A report may be made to the 24-hour statewide Child Abuse and Neglect Hotline, 1-800-522-3511.

Produced by



Save the Children®

in
partnership
with



**ZERO
TO
THREE®**

National Center for Infants,
Toddlers, and Families



Shelter From the Storm

A Guide for Early Care and Education Providers

ZERO TO THREE is a national, nonprofit organization established in 1977 that provides parents, professionals, and policymakers the knowledge and know-how to nurture early development. Our mission is to ensure that all babies and toddlers have a strong start in life.
www.zerotothree.org

Save the Children invests in childhood—every day, in times of crisis and for our future. In the United States and around the world, we give children a healthy start, the opportunity to learn, and protection from harm. By transforming children’s lives now, we change the course of their future and ours.
www.savethechildren.org

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Welcome

Using This Guide With Your Colleagues

Here are some suggestions for using this guide in conversations, whether during a team meeting, a staff meeting, or a professional development workshop:

- Share stories about a time someone has helped you feel secure in an everyday situation. Discuss what this person said or did to help you feel this way (e.g., be dependable, listen, hug you, give you words for your feelings). Then share stories of a time you helped a child feel secure. What did you say or do? How did the child respond?
- Discuss how what you say and do every day to build trusting, secure relationships can support a young child if and when disaster strikes.
- Discuss and chart what children might be experiencing. Chart ideas about how you might respond.
- Review your safety routine. Identify three strategies you can incorporate to help children feel more secure and emotionally safe.
- Discuss the link between self-care and caring for others. Come up with a self-care practice you can incorporate in your daily routine (e.g., bring in a flower to put on the counter, sip your favorite tea, share a story about something a child did that made you smile).
- Go through the items in your Go-Bag. Which ones offer emotional support? What might you add to help children feel more safe and comfortable in an emergency situation?

For additional training on emergency preparedness, please see Save the Children's "Get Ready. Get Safe." Website at www.savethechildren.org/getready

Do you teach and care for babies, toddlers, and their families in a center-based program? Or in your home? Are you a professional development specialist who supports early care and education providers?

This guide was written for you by Save the Children, the nation's leading expert on children in the event of disaster, and ZERO TO THREE, a national organization dedicated to ensuring that all babies and toddlers have a strong start in life. The goal of this guide is to provide you information to help you meet the emotional needs of young children and their families before, during, and after a disaster.

It can be tempting to think, "Oh, they're too young to remember—they won't be affected by what's happening." Actually, even though young children may not understand what they see or hear, they are taking everything in and trying to make sense of what they are experiencing. Caregivers play a critical role in helping to shape how children perceive the world around them. In fact, young children are "amazingly tuned into the behaviors and emotions of the significant caregivers in their lives including parents, grandparents, relatives, teachers, and other adults" (Osofsky, 2007, p. 4).

Young children remember early relationships and experiences in their bodies and minds even before they have words to talk about what is happening. Early memories help shape children's views of themselves and others.

Research on parent-child attachment over the past 60 years supports the understanding that consistent, sensitive, and responsive caregiving early in life sets a pattern for young children's optimal expectations of people in the future (Dykas & Cassidy, 2011). Those experiences can serve as a buffer to protect children from scary, traumatic experiences, such as natural disasters, or leave them vulnerable, with fewer ways to cope.

Although you cannot prevent a child from being upset and frightened during a disaster, you can work to ensure she remembers that someone—you—were there to comfort and support her. It is you, your voice,

your smile, the silly song you sing together, your calm explanation of what is happening that will help a child—and family—to feel connected, confident, and competent in difficult times.

Supporting others during events when you feel frightened or overwhelmed is not easy. This is true, especially if and when memories and feelings from a previous disaster are stirred up. But with your own support system, coping strategies, and tools such as these, you can do it. This guide will help.

Using This Guide

We at Save the Children and ZERO TO THREE invite you to use this guide to inform conversations with colleagues and families about ways you can support a young child's emotional well-being before, during, and after a disaster.

We know you are busy. In response, we have designed this guide to make it easy for you to use whether in a staff meeting or a parent workshop. Charts and boxes will provide helpful information at a glance. Some of the content will affirm what you already know and do. Some will offer new information, insights, and strategies to strengthen your partnerships on behalf of babies and toddlers.

In each section, you will find charts in the voice of babies and toddlers. These charts convey possibilities of what children may be experiencing and ideas of ways you might respond. Because babies and toddlers don't communicate through words, you have to pay attention to their behavior and ask yourself, "What is a child's behavior telling me?" You can then use this information to help you decide how best to respond.

You will also find simple and realistic ways to take care of yourself. Self-care doesn't often come naturally for people who have chosen a career path of caring for others. But by taking care of yourself, you can be more present and effective in seeing and responding to others during times of calm, as well as during times of confusion.

We begin this conversation with you. Why? Because "how you are, is as important as what you do (Pawl & St. John, 1998, p. 3)."

Talking With Families

Here are some tips for talking and partnering with families about ways you can work together to prepare and protect their children in the event of a disaster:

- **Provide some basic information about how to help babies and toddlers feel safe.** For example, talk about the importance of trusting relationships and routines. Ask parents how their children are most easily comforted, or discuss what you have noticed provides comfort for their children.
- **Review your program's Go-Bag items with families.** Point out those that have been included to support children's emotional well-being. Encourage families to provide ideas and items that will comfort their individual child. Encourage families to include "emotional support" items in their Go-Bags at home.
- **Discuss what children might be experiencing and how parents might respond supportively.**
- **Share how you provide safety-themed activities throughout the year to teach children about the people in the community who protect them and keep them safe (e.g., firefighters, police officers, doctors, emergency medical service technicians).** Invite families to join you for these lessons. Send artwork or flyers home with information about what you shared with the children.

Section One:

Focus on You



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Young children and their families depend on you. When you take care of yourself—professionally and personally—you are better able to respond to their needs. You are also better able to focus on what is happening in the moment and be aware of how your history with disasters and other unexpected difficulties shape your response.

They say *practice makes permanent*. This idea is not only true for running a quality program or conducting safety drills; it is true when it comes to taking care of you.

By practicing taking care of yourself in your everyday life, you will be better able to take a breath and think a little more clearly when the unexpected strikes.

In addition, by taking care of yourself you will be calmer, which, in turn, will help the children in your care feel more relaxed. You will also be modeling and introducing children to self-care skills that will serve them well throughout their lives.

stretch

smile

breathe

Self-Care Techniques

Consider trying one, or more, of the self-care techniques described below.

A. Commit to finding ways to focus on your self-care:

- a. Find a co-worker to partner with you and remind each other to practice self-care.
- b. Write and post notes in different places to remind yourself to stretch, breathe, or smile.
- c. Write in a journal, or reach out to a comforting friend regularly.
- d. Create a daily routine so your mind and body know what to expect and when (e.g., eating, sleeping).

B. Take 5 minutes at some point during the day to have quiet time (e.g., no phone, music, chatting).

C. Try a breathing exercise:

- a. Inhale for 2 seconds and exhale for 4 seconds, then say to yourself an affirming statement (e.g., "I am capable.", or "I'll handle what I can handle.").
- b. Square breathing: Exhale, hold, inhale, and hold your breath again, to the count of 4 and then repeat the process (e.g., inhale, 2, 3, 4; hold, 2, 3, 4; exhale, 2, 3, 4; hold, 2, 3, 4).

D. Do a check for muscle tension in your body—do you feel it in your neck, back, stomach? Stretch your body at regular intervals throughout the day.

E. Create a comforting, inspiring environment, both at home and at work. Incorporate a family photo, plant, or favorite colors into your environment.

F. At the end of the day, think of all you accomplished and give yourself a pat on the back. You did all you could do today: great job! There will always be more to do, but you are done for today and it is enough. Tomorrow will be another day.

Section Two:

Before a Disaster



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It's natural to worry about how to keep children safe during a disaster. Or, you may worry that you will panic, or that children will be scared, or overwhelmed. These are normal concerns.

It can be comforting to keep in mind that many of the things you say and do every day with children are the same things children need from you when disaster strikes. This section will explore:

- How your everyday interactions build a secure, trusting relationship that can buffer children from stress
- What babies and toddlers may experience and how you might respond: In a child's words
- Creating a safety routine

Your Everyday Interactions Build a Secure, Trusting Relationship That Can Buffer Children From Stress

The words you say and activities you do day-by-day help children feel connected to you, which in turn frees children to feel and be more assured. These are experiences that are positive for all children and ultimately support them in dealing with life's ups and downs—minor and major. In fact, research shows that infants and toddlers who have trusting relationships with sensitive, attuned adult caregivers are less likely to experience high stress reactions when frightened by an event (National Scientific Council on the Developing Child, 2007).

What Babies and Toddlers May Experience and Ways You Might Respond: In a Child's Words

When I...	I may be saying...	How you can support me today and in case disaster strikes
Smile and give you a hug in the morning. Snuggle up with you to read a book.	I trust you. You are one of the important adults in my life.	Show me I can count on you: Strengthen our relationship and the trust between us by being dependable, consistent, warm and caring, and responsive.
Make a tower of four blocks or eat using my spoon—and look up at you with a smile.	I can do it! Look at me! I'm proud. What can I try next?	Teach me that I can manage: Create the opportunity for me to practice and "do it myself." For example, invite me to hold my bottle, stand at the sink on a footstool to wash my own hands, or help you set the table for snack. Share my delight in my accomplishments. Such as, "Wow! Look how you found the right piece. You're working so hard to put this puzzle together."
Cry and hold onto you when I am sad because Mommy has to go to work. Or call you to help when my ball is stuck under the sofa.	I count on you to help me when I am upset or something happens. Some days I need you more than others.	Show me I can count on you to help me be calm, handle my feelings, and solve problems: Be calm. It helps me to know that everything will be OK. Listen to my feelings. Give me words to help me understand what is happening. Help me problem-solve. "Let's use this ruler to reach your ball." You are teaching me I am competent and can manage.
Cry or look startled or unsure when we have a safety drill.	What is happening?	Stay calm and I will know everything is OK. Tell me the story of what is happening: "The bell is ringing. That means we have to go outside (or in the basement, or to the shelter) to be safe. You can ride in your crib (or I'll carry you, or you can hold my hand)."

When I...	I may be saying...	How you can support me today and in case disaster strikes
Insist on being held, fuss, run around, or look withdrawn after a safety drill.	Is that loud sound going to happen again? Am I safe to settle back into our routine?	<p>Help me understand what is going on and what to expect:</p> <p>Tell me the story of the drill again: "The bell rang and we went outside to be safe. Now we can settle back into our room and play."</p>

Your preparation combined with techniques you use in everyday care such as using a soothing voice, routines, and your calm presence can be reassuring to you both. Your soothing presence will help model calm responses to new events.

Creating a Safety Routine

Routines play an important role in creating environments that support emotional and physical safety. Remember: Routines need planning and practice! Please refer to the table below to help you in developing, writing, and practicing your plan so it becomes a routine. Add the special touches that you do in everyday care—sing a special song, smile, use a soft tone of voice. Practice your safety routine in a calm, joyful way now so when the real time comes you will know what to do and the children will find comfort in going through the motions that they are familiar with. One important note: In addition to the information below, please refer to your state's licensing standards for emergency preparedness requirements.

I need to know...	I will plan...	I will consider...
When to begin safety routine/receiving information.	Who/how the message will be delivered.	<ul style="list-style-type: none"> • Loud noises can be upsetting to children. • Watching TV with extreme weather images can be scary to young children.
Where to go	Location	<ul style="list-style-type: none"> • Contacting fire/emergency personnel to help identify safest space. • If you are in a space in which a child's sibling(s) are present, consider working with their teacher to try to bring them together for comfort.

I need to know...	I will plan...	I will consider...
What to bring for comfort	Pre-pack a Go-Bag, including comforting items	Including: <ul style="list-style-type: none"> • Soft blankets • Soft “light up” plush toys • Few books, puppets, or toys • List of soothing songs or rhymes • Lovey or Snuggly • Pacifier
How to get there	Route	<ul style="list-style-type: none"> • Practicing route during calm times. Think of how you will get the children to the safest place. • Having a plan in mind will help you stay calm if an event occurs.
Where my list of steps will be stored when I get the signal to begin my safety routine	Write out a concise list of the steps of your safety routine (see box Example Safety Card)	<ul style="list-style-type: none"> • Posting safety card in easy-to-reach spot • Preparing a card so you can put it in your pocket and bring it with you • Always having updated child information with you on a clipboard, notecards, etc., to have with you. Have numbers in your cell phone, too.
Remember: PRACTICE MAKES PERMANENT!		

Example Safety Card

TO DO

- ✓ Take a deep breath.
- ✓ Gather children quickly and calmly, ready to move to safe space in stroller.
- ✓ Count children.
- ✓ Get “Go-Bag” and medications.
- ✓ Tell the children: “It is time to go to our safety place.”
- ✓ Move to safe space.
- ✓ Count children.
- ✓ Sing “Ants Go Marching” in soothing tone as you settle the children.
- ✓ Take out comfort items and distribute to children.
- ✓ Talk to children about where you are and that you will stay with them the whole time.
- ✓ Read books, sing songs, etc... until you receive the all clear.
- ✓ Answer children’s questions about what is happening and where is Mommy or Daddy using simple, honest words.
- ✓ Remember: You’ve got this! As long as you are calm and focused the children will be better able to take your cues and be calmer, too.

Quick self-care —

*Calmly
prepare
to shelter* — [

*Settle,
assure, and
comfort the
children* — [

Quick self-care —

Section Three:

During a Disaster



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When alarms are ringing, the electricity goes out, or the unexpected occurs, it is your emotions and relationships that can create a sense of calm and assurance.

This is where all the work you have put into building relationships and practicing safety and daily routines pays off.

Reading and discussing the chart on the next page with colleagues and families can help you and other caring adults know how best to support the children in your care during a disaster. As you make connections between children's behaviors and their feelings, you can be more responsive to their needs. Also, the information in this chart may help to reassure you that behaviors that might seem unusual in everyday life can be a common response from a child and are to be expected during an emergency.

What Babies and Toddlers May Experience and Ways You Might Respond: In a Child's Words

Here are some of the behaviors you might see, examples of what children may be thinking and feeling, and ideas of how you might respond.

When I...	I may be saying...	How you can support me
Cry, cling, hit or kick, or get quiet and still.	I am worried or afraid. Something is going on. I feel unsettled. Unsure. Confused. Overwhelmed.	Offer me simple, clear words for what is happening: "We are waiting for the strong winds to pass." Smile. Offer me a hug. Reassure me: "I am with you and holding you close." Or, "We are here together and safe now." Let's sing a song we always sing together. Or tell me a story.
Stare, look wide-eyed, cling, or suck my thumb.	I'm confused. Overwhelmed.	Tell me simply and honestly what is happening: "We are here in the closet. I know it is dark, but we are together and safe." Give me my "lovey" or "snuggly" if we have it with us. Give me a sense of control. Let me squeeze my stuffed toy that lights up.
Cry for my mommy or daddy.	I want my most important people.	Tell me simply and honestly about my parents: "Your mommy/daddy said you can stay here with me until the storm is over. Then they want to come pick you up and give you a big hug." Show me a photo of my family if we have it with us. Give me my "lovey" or "snuggly."
Fuss	I may be hungry or tired or afraid.	Offer me something to eat or drink if you can. Or a space to sleep. Try to help me feel a sense of routine. Explain: "Even though we are in a different place, it is snack time/naptime."

Section Four:

After a Disaster



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Long after the winds and rains stop and the sun begins to shine, children—and adults—can and often do continue to experience repercussions from the event.

This section focuses on how you and the other adults in a child's life are affected by, cope with, and work together after a disaster to support the children in your care.

In this section, we consider what you may feel and experience:

- Strategies to help you and other adults cope
- When families need additional assistance
- What babies and toddlers may experience and ways you might respond: In a child's words

What You May Feel and Experience

Any caregiver of children may have the following emotions and/or experiences following an event:

Forgetfulness
Fogginess, numbness
Driven and focused
Sadness, grief, loss
Lack of motivation
Preoccupation with the event, avoidance
of talking about the event
Irritability
Anger
Distractibility, trouble concentrating,
focusing on small, doable tasks
Worry, anxiety
Sensitivity
Nervousness
"Jumpy"
Racing thoughts
Feelings of guilt
Somatic symptoms such as headaches,
stomachaches, difficulty sleeping or
sleeping too much

Below are some strategies to help you cope with difficult feelings and emotions you may be experiencing following a disaster.

Strategies to Help You and Other Adults Cope	
Self-talk or talking aloud	<ul style="list-style-type: none"> • Get outside of your emotions by narrating what you are doing or are going to do. • Encourage yourself and others! Say positive things to yourself: "I've got this!" or "I am capable of dealing with difficult circumstances."
Get perspective	<ul style="list-style-type: none"> • Remember that you are all human and this was a big event. • It is normal to have an emotional reaction. • It is important to take care of yourself. • If the negative feelings don't pass, or are affecting your functioning after some time has passed, it may be time to talk to a mental health professional.
Take care of yourself	<ul style="list-style-type: none"> • Talk with friends, take a walk, think about something that made you smile today. • Get back to healthy eating, exercise, and adequate sleep as soon as you can. • Write in a journal about your feelings.
Routines	<ul style="list-style-type: none"> • Knowing what to expect when you are coping with big emotions can help to keep you, other adults, and the children calm. • You may need to set new daily routines based on your location. • Write down your new routine and post it on the wall, or keep it in your pocket • Respect others' routines around you.
Keep an organized environment	<ul style="list-style-type: none"> • Knowing where to find items and having an orderly environment can make you and others feel calmer. • If you are in new surroundings, decide where things will go and label those spots. • Share new locations with co-workers and parents. • Pick up and organize your space throughout the day.
Minimize loud noises and sudden movements	<ul style="list-style-type: none"> • After an event, loud noises and sudden movements can make people feel unsettled. • Find quiet where you can. • Speak in calm tones. • Minimize use of the public announcement system. • Move slowly and deliberately.
Stay in the present moment	<ul style="list-style-type: none"> • It is easy to feel overwhelmed by your feelings after an event. • Watch out for negative thinking.
Respectful communication	<ul style="list-style-type: none"> • Avoid judgments. • Stick to observations and facts.

Seeking Help for Yourself

Sometimes no matter how good your coping skills are, or how hard you try, you may need more support. If your feelings are getting in the way of your work and family life, it may be time to reach out for professional support.

When Families Need Additional Assistance

Sometimes, no matter how supportive you are, a parent may need extra help. You can provide this support when you:

- Share resources with parents in a gentle, supportive manner.
- Know trusted resources in your area, or a hotline for area resources to provide to parents.
- Collect printed resources and make them easily available for families who may not be comfortable asking for support.
- Host a community resource fair; this is often a way for families to access resources without directly asking for help.
- Refer families to the next level of care when needed.

What Babies and Toddlers May Experience and Ways You Might Respond: In a Child's Words

When I...	I may be saying...	How you can support me
Cry, fuss, cling, withdraw, or get quiet and still	Things still feel strange to me.	Cuddle and hug me. I need extra loving to help me feel safe and secure when things are so uncertain. Offer me safe ways to express feelings, such as drawing, pretend play, or telling stories.
Stay still. Show no interest in playing or talking with you or anyone.	I'm still worried.	Come sit with me. Invite me to play, read a book, or take a walk.
Cling, scream, and cry when you leave me—even to go into another room.	I'm still scared. I feel better when you are with me.	Tell me when you are going into another room and talk about what you are doing out loud so I know you are still close by. Tell me who will take care of me if you have to go and reassure me you will be back.

When I...	I may be saying...	How you can support me
Want everything to be done “my way.”	I want and need a sense of control. Things have been crazy around here lately.	Be patient and calm as you can. I need your help to regain a sense of control and feel safe. Find appropriate ways to empower choices so that I can be in control of some things. For example, “Would you like to color with the red or the blue marker?”
Talk about our old center or friends who have moved away.	I miss my friends and familiar places. I miss how life used to be.	Listen. Acknowledge that things have changed. Tell stories, draw pictures, or look at photos to help me remember places and people. Help me write a letter to my old friends or child care program.
Am more aggressive—I may hit, kick, or bite you or other people.	I am so upset! Everything is different.	Comfort me. Offer me limits in positive ways so I know that I can count on you to help me handle my intense feelings. Explain: “Even though you are upset, I will help you so you don’t hurt another person or yourself.” Keeping me from being hurtful will help me feel good about myself again.
Don’t want to eat. Or have trouble sleeping.	I don’t feel totally safe.	Reassure me. Create a comforting sleep routine—reading, singing a song or two, giving me my blanket or “love.” I may need to be near you for a bit. It won’t be forever. You can help me to feel safe enough to sleep on my own again.
Act out scary events in my play.	I am trying to understand and gain a sense of control about what has happened.	Let me play. Join in. Narrate what I am playing so I know you understand what I am telling you and so I can gain some words of my own to talk about what happened. Let me use play dough or other art materials to express my emotions.

When I...	I may be saying...	How you can support me
Return to earlier behaviors, such as thumb sucking and wetting my pants.	I want to be cared for. It's hard for me to hold it all together right now.	Be understanding and patient. Reassure me we are OK. Honor self-soothing in the immediate aftermath. Don't get angry at me for these behaviors. They will stop when I feel safe again.
Am happy, singing, playing.	I feel happy right now.	Play with me. Let's have a good time—even though things are different.
Gaze in your eyes, smile, reach for you, give you a hug, run into your arms.	I love you. I'm so glad you are here for me.	Laughing and being silly together is fun—and can help us both feel calm. Let's enjoy being together.

What to Say?

Talking about an event can be a challenge for adults. How can a life-changing catastrophe fit into words? And if you can find the words, thinking and saying them can bring back disturbing feelings and memories. Yet babies and toddlers need to hear the story of what happened to make sense of it and to feel connected to you.

Do your best to talk about what is going on using clear, simple, and honest language. Here are some examples to get you started:

- The wind was blowing and made a big noise. We went into the basement in the child care center to be safe, and now we are here at the shelter.
- The firemen came to our center after the big wind and asked us to move away from the glass to be safe. We are here now, and will wait together until your mom/dad/grandma comes to get you.
- We heard the sirens and we went to our safe place. Then we turned on the flashlights and had a snack. Now we are going to the shelter, and your mom/dad/grandma will come get you.

Signs a Child Is Saying, “I’m Having a Difficult Time.”

Although all of these behaviors are common responses to a frightening event, when they persist over time and interfere with a child’s daily life, it can be a sign that the child and family need extra support. These behaviors during difficult times can put additional stress on already burdened parents, which can be the start of a negative cycle. Or, it can be an opportunity for you to support families as they tap into their resilience.

The list below identifies behaviors that families (and you) might see and what family members might say to you:

- Increased clinging, crying, and whining: “He’s really getting on my nerves.” “She sticks to me like glue.”
- Greater fear of separation from parent at home or other primary caregiver: “She doesn’t let me out of her sight.” “I feel like I can’t have a minute on my own.”
- Increase in aggressive behavior: “She’s being bad.” “The teacher told me she hit and kicked other children today in child care.”
- Withdrawing: “He’s never been this good before.” “She’s so quiet these days.”
- Harder to show interest in activities and other people: “He doesn’t seem interested in anything.” “She just sits there.”
- Changes in sleeping and eating patterns: “She falls asleep when we are out.” “He used to love scrambled eggs. Now he just pushes them aside.”
- More easily frustrated and harder to comfort: “Nothing I do makes her happy.” “She whines all the time.”
- Return to earlier behaviors, such as waking up at night, toileting accidents, and thumb sucking: “He’s acting like such a baby.”
- Replaying scenes experienced or heard about. “He’s been pretending to be in a dark closet turning his flashlight off and on and calling, ‘help!’”

Adapted from *Honoring Our Babies & Toddlers: Supporting Young Children Affected by a Military Parent’s Deployment, Injury, or Death* with permission from ZERO TO THREE

Closing Thoughts

The trusting relationships you build during everyday moments help young children feel safe and secure as they grow and learn. Pause a moment and think about the babies and toddlers you care for and teach each day. How are they growing and learning? What are some of the things they do or say that make you smile and feel proud, such as roll over for the first time, reach for a rattle, taste a new food, catch your eye for a game of peek-a-boo, put on a dress-up hat, or wave to say, “bye-bye”? You have helped them to reach these important milestones.

You always have their physical safety in mind. What are some of the ways that you have kept children safe in the last week? For example, think about decisions you have made about the physical environment, classroom rules, and staying nearby so that you can offer a helping hand when needed.

Every day you keep children safe and protect them from harm—emotional and physical—through the decisions you make, by knowing what to do, and reacting in a calm manner. Your everyday interactions, together with planning and preparation, will help you keep children safe today—and in the case of a disaster.

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ADDITIONAL EMERGENCY PREPAREDNESS TRAININGS

Child Care Aware—Crisis and Disaster Resources
www.naccrra.org/programs-services/crisis-and-disaster-resources

FEMA Disaster Preparedness Trainings <http://training.fema.gov/is/courseoverview.aspx?code=is-366>

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